

NOV 24 2003

2912 Crosby Road
Charlotte, NC 28211-2815
Phone: (704) 365-4881
Fax: (704) 365-4881

ProPat, L.L.C.

OFFICIAL

OFFICIAL

Fax

To:	USPTO Examiner Vivian Chen Art Unit 1773	From:	Claire Wygand for Klaus Schweitzer Phone: (704) 365-4881 Fax: (704) 365-4881
Fax:	(703) 872-9306	Pages:	14 pages total Transmittal facsimile cover sheet (1 page) Fee Transmittal Sheet (1 page) Limited Recognition Form (1 page) Amendment 10 pages) One-Month Extension of time (1 page)
Phone:	(703) 308-0661 – Receptionist	Date:	November 24, 2003
Re:	Application No. 09/910,232; Filed 7/20/01 PEIFFER et al. Our Ref.: 00/121 MFE Response to Office Action dated Aug. 6, 2003	CC:	

Dear Examiner Chen,

Attached is an Amendment in response to the Official Action dated August 6, 2003. Also included is a Request for a 1-month Extension of Time; Fee sheet; and a copy of the Limited Recognition under 37 C.F.R. § 10.9(b) for Klaus Schweitzer.

Respectfully submitted,

Claire Wygand

PTO/SB/17 (11-01)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person is required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 110.00)

Complete if Known

Application Number	08/910,232
Filing Date	July 20, 2001
First Named Inventor	PEIFFER et al.
Examiner Name	Vivian Chen
Group Art Unit	1773
Attorney Docket No.	00/121 MFE

METHOD OF PAYMENT (check all that apply)				FEE CALCULATION (continued)																					
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account 502193 Deposit Account Number ProPat, LLC Deposit Account Name				3. ADDITIONAL FEES <table border="1"> <thead> <tr> <th>Large Entity</th> <th>Small Entity</th> <th colspan="2">Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Fee</td> <td>Fee</td> <td>Fee</td> <td>Fee</td> </tr> <tr> <td>Code (\$)</td> <td>Code (\$)</td> <td>Code (\$)</td> <td>Code (\$)</td> </tr> </tbody> </table> <p>The Commissioner is authorized to: (check all that apply)</p> <p><input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments</p> <p><input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application</p> <p><input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.</p>				Large Entity	Small Entity	Fee Paid		Fee	Fee	Fee	Fee	Code (\$)	Code (\$)	Code (\$)	Code (\$)						
Large Entity	Small Entity	Fee Paid																							
Fee	Fee	Fee	Fee																						
Code (\$)	Code (\$)	Code (\$)	Code (\$)																						
FEE CALCULATION				Fee Paid 105 130 205 65 Surcharge - late filing fee or oath 127 50 227 25 Surcharge - late provisional filing fee or cover sheet 139 130 139 130 Non-English specification 147 2,620 147 2,620 For filing a request for ex parte reexamination 112 920* 112 920* Requesting publication of SIR prior to Examiner action 113 1,840* 113 1,840* Requesting publication of SIR after Examiner action 115 110 215 55 Extension for reply within first month 110.00 116 400 218 200 Extension for reply within second month 117 920 217 480 Extension for reply within third month 118 1,440 218 720 Extension for reply within fourth month 128 1,960 228 980 Extension for reply within fifth month 119 320 219 180 Notice of Appeal 120 320 220 160 Filing a brief in support of an appeal 121 280 221 140 Request for oral hearing 138 1,510 138 1,610 Petition to institute a public use proceeding 140 110 240 56 Petition to revive - unavoidable 141 1,280 241 640 Petition to revive - unintentional 142 1,280 242 640 Utility issue fee (or release) 143 480 243 230 Design issue fee 144 820 244 310 Plant issue fee 122 130 122 130 Petitions to the Commissioner 123 50 123 50 Processing fee under 37 CFR 1.17(q) 128 180 128 180 Submission of Information Disclosure Stmt 581 40 581 40 Recording each patent assignment per property (times number of properties) 145 740 246 370 Filing a submission after final rejection (37 CFR § 1.129(e)) 149 740 249 370 For each additional invention to be examined (37 CFR § 1.128(b)) 178 740 279 370 Request for Continued Examination (RCE) 169 900 189 900 Request for expedited examination of a design application																					
1. BASIC FILING FEE				Fee from below Fee Paid Total Claims -20**= X -0- Independent Claims -3**= X -0- Multiple Dependent [] -																					
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE				Fee Description Fee Code (\$)																					
<table border="1"> <thead> <tr> <th>Large Entity</th> <th>Small Entity</th> </tr> </thead> <tbody> <tr> <td>Fee</td> <td>Fee</td> </tr> <tr> <td>Code (\$)</td> <td>Code (\$)</td> </tr> </tbody> </table>				Large Entity	Small Entity	Fee	Fee	Code (\$)	Code (\$)	<table border="1"> <thead> <tr> <th>Fee Description</th> <th>Fee Code (\$)</th> </tr> </thead> <tbody> <tr> <td>Claims in excess of 20</td> <td>18</td> </tr> <tr> <td>Independent claims in excess of 3</td> <td>84</td> </tr> <tr> <td>Multiple dependent claim, if not paid</td> <td>280</td> </tr> <tr> <td>**Reissues independent claims over original patent</td> <td>84</td> </tr> <tr> <td>**Reissues claims in excess of 20 and over original patent</td> <td>18</td> </tr> </tbody> </table>				Fee Description	Fee Code (\$)	Claims in excess of 20	18	Independent claims in excess of 3	84	Multiple dependent claim, if not paid	280	**Reissues independent claims over original patent	84	**Reissues claims in excess of 20 and over original patent	18
Large Entity	Small Entity																								
Fee	Fee																								
Code (\$)	Code (\$)																								
Fee Description	Fee Code (\$)																								
Claims in excess of 20	18																								
Independent claims in excess of 3	84																								
Multiple dependent claim, if not paid	280																								
**Reissues independent claims over original patent	84																								
**Reissues claims in excess of 20 and over original patent	18																								
SUBTOTAL (1) (\$ 740.00)				Other fee (specify) _____																					
SUBTOTAL (2) (\$ 0)				*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$ 110.00)																					

SUBMITTED BY					
Name (Print/Type)	Klaus Schwitzer	Registration No. (Attorney/Agent)	Limited Recognition	Telephone	(704) 365-4881
Signature	<i>K. Schwitzer</i>			Date	Nov. 24, 2003

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231.